



UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Kevin Richardson

Confirmation No.: 4029

Serial No.: 10/047,482

Examiner: L. Kontos

Filing Date: October 23, 2001

Group Art Unit: 3763

Docket No.: 1001.1441101

Customer No.: 28075

For: CONE TIP BILIARY CATHETER AND METHOD OF USE

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PETITION FOR A ONE-MONTH EXTENSION OF TIME

CERTIFICATE UNDER 37 C.F.R. § 1.10: The undersigned hereby certifies that this paper or papers, as described herein, are being deposited in the United States Postal Service, "Express Mail Post Office to Address", having an Express Mail mailing label number of: EV 315613731 US, in an envelope addressed to:
Mail Stop AF, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450
on this 22nd day of April 2004.

By Kathleen L. Bockley
Kathleen L. Bockley

Dear Sir:

It is requested that the time for filing the attached RCE and Amendment, now set to expire on March 22, 2004, be extended for one (1) month to now expire on April 22, 2004. Fees in the amount of \$110 are attached hereto.

Respectfully submitted,

Kevin Richardson

By his Attorney,

David M. Crompton
David M. Crompton, Reg. No. 36,772
CROMPTON, SEAGER & TUFTE, LLC
1221 Nicollet Avenue, Suite 800
Minneapolis, MN 55403-2420
Telephone: (612) 677-9050
Facsimile: (612) 359-9349

Date: 4/22/04

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Kevin Richardson Confirmation No.: 4029
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TRANSMITTAL SHEET

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Sir:

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By Kathleen L. Boekley
Kathleen L. Boekley

We are transmitting herewith the attached:

- [] Amendment
[] No additional claim fee required
[] The claim fee has been calculated as shown:

CLAIMS AS AMENDED							
	(3)	(4)	(5)	SMALL ENTITY		OTHER	
	REMAINING CLAIMS	HIGHEST PAID	EXTRA	RATE	ADD'L FEE	RATE	ADD'L FEE
TOTAL CLAIMS	-	=		X 9=	\$	X 18=	\$
INDEPENDENT CLAIMS	-	=		X 43=	\$	X 86=	\$
() FIRST MULTIPLE DEPENDENT CLAIM				+ 145 =	\$	+ 290 =	\$
TOTAL				\$		\$	



[XX] A check in the amount of \$110.00 is enclosed. Itemization:

Fee Code 1251 \$110.00

Fee Code _____ \$

Fee Code _____ \$

[] Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established.

[XX] Other: PETITION FOR A ONE-MONTH EXTENSION OF TIME.

[XX] Return Receipt Postcard (MPEP 503).

[XXXX] Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413.

By: 
David M. Crompton, Reg. No. 36,772

David M. Crompton
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